DOCUMENT RESUME

ED 203 609 EC 132 894

AUTHOR	Algozzine, Bob: And Others
TITLE	Classroom Perspectives of LD and Other Special Education Teachers.
INSTITUTION	Minnesota Univ., Minneapolis. Inst. for Research on Learning Disabilities.
SPONS AGENCY	Bureau of Education for the Handicapped (DHEW/OE), Washington, D.C.
REPORT NO	IRLD-RR-35
PUB DATE	Jul 80
CONTRACT	300-77-0491
NOTE	24p.
EDRS PRICE	MF01/PC01 Plus Postage.
DESCRIPTORS	Delivery Systems: *Handicap Identification: Learning Disabilities: *Mild Disabilities: Mild Mental Retardation: *Resource Room Programs: Special Education Teachers: *Teacher Attitudes: Teaching Methods

ABSTRACT

The extent of similarities and differences among educable mentally retarded (EMR), learning disabled (LD), and emotionally disturbed (ED) children was investigated with 75 resource room teachers. Teachers were asked to provide information regarding the children in their classes and some of their program activities: equal numbers of each type of teacher were sampled on two occasions. An analysis of the results indicated many similarities and some differences among the teacher responses. Similarities included the importance of affective needs and the need to reduce inappropriate behaviors. Differences tended to relate to service delivery and included seeing LD children for more time than EMR or ED children. (Author/DB)

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ED203609

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University of Minnesota

Research Report No. 35

CLASSROOM PERSPECTIVES OF LD AND OTHER SPECIAL EDUCATION TEACHERS

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John Beattie, and Rex Schmid

IRLD

Institute for Research on Learning Disabilities

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The Institute for Research on Learning Disabilities is supported by a contract (300-77-0491) with the Bureau of Education for the Handicapped, Department of Health, Education, and Welfare, U.S. Office of Education, through Title VI-G of Public Law 91-230. Institute investigators are conducting research on the assessment/decision-making/intervention process as it relates to learning disabled children. Research activities are organized into eight major areas:

I. Adequacy of Norm-Referenced Data for Prediction of Success

II. Computer Simulation Research on the Assessment/Decision-making/Intervention Process

III. Comparative Research on Children Labeled LD and Children Failing Academically but not Labeled LD

IV. Surveys on In-the-Field Assessment, Decision Making, and Intervention

V. Ethological Research on Placement Team Decision Making

VI. Bias Following Assessment

VII. Reliability and Validity of Formative Evaluation Procedures

VIII. Data-Utilization Systems in Instructional Programming

Additional information on these research areas may be obtained by writing to the Editor at the Institute.

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Research Report No. 35

CLASSROOM PERSPECTIVES OF LD AND OTHER SPECIAL EDUCATION TEACHERS

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July, 1980

Abstract

The extent of similarities and differences among educable mentally retarded, learning disabled, and emotionally disturbed children has been the subject of some research. Teachers in this investigation were asked to provide information regarding the children in their classes and some of their program activities; equal numbers of each type of teacher were sampled on two occasions. An analysis of the results indicated many similarities and some differences among the teacher responses. A discussion of the finding is presented.

Classroom Perspectives of LD and Other

Special Education Teachers

Educational programs for exceptional children traditionally have been organized on a categorical basis; that is, children thought to exhibit one type of handicap have been grouped with other similarly disabled children. This service delivery by category model has led to a similar organization of teacher training programs and state certification practices (Forness, 1976; Hallahan & Kauffman, 1976; Lilly, 1977). Only 20 percent of the states currently award certification in a noncategorical manner (Belch, 1979).

As indicated by Belch, the "idea of comprehensive teacher training and noncategorical teacher certification is certainly not new" (p. 129). In fact, Laycock (1934) advocated the training of educational diagnosticians without regard to various categorical programs of instruction, and Lord (1956) indicated that special education services should become less "bogged down" with categories and apparent differences between them, and more involved with comprehensive, inclusive programming.

Recently, the noncategorical perspective has begun to re-emerge (Forness, 1974, 1976; Lilly, 1977; Reynolds & Balow, 1972). Hallahan and Kauffman (1976) have suggested that this is due to the limited utility (from an instructional perspective) of categorical groupings; they argued that many children within the major special education categories respond to similar teaching methods and that teachers generally deal with behaviors that overlap considerably among categories. They suggest that, everything else "being equal, the ED hyperactive child with a figure-ground reversal problem, the LD hyperactive child with a figure-ground reversal

problem, and the EMR hyperactive child with a figure-ground reversal problem will all be taught in the same manner" (p. 35). In a survey of state directors of education and certification, Belch (1979) found that 11 states had a "comprehensive" type certificate and 12 more were "headed in that direction."

In spite of the efforts to represent the majority of handicapped children within a noncategorical frame of reference, most states still utilize separate definitions for learning disabled (LD), educable mentally retarded (EMR), and emotionally disturbed (ED) children (Epstein, Cullinan, & Sabatino, 1977; Mercer, Forgnone, & Wolking, 1976; Neisworth & Smith, 1978) and certify teachers accordingly (Belch, 1979). Mentally retarded children are differentiated from ED and LD children by aberrant intelligence (IQ) scores while the categories of ED and LD are seen as different based upon the types of behaviors thought to be most characteristic of each. Again, however, it is important to note that many researchers feel there are more similarities than differences between the categories, regardless of definitions (Forness, 1974; Hallahan & Kauffamn, 1977; Neisworth & Greer, 1975; O'Grady, 1974).

Some research has examined similarities and differences among the three major special education categories. Becker (1978) investigated performance differences between "educationally handicapped" (i.e., ED and LD) and educable mentally retarded children. Several areas of difference were identified; however, it was suggested that these differences were likely due to the IQ and mental age scores being different for the children studied. Gajar (1979) also "analyzed characteristics, across categories, attributed to children identified as educable mentally retarded,

learning disabled, and emotionally disturbed" (p. 470). Again, EMR children were found to have lower measured IQ scores. Some differences were indicated in achievement scores among the categorical groups. However, an abundance of statistical power (number of subjects greater than 100 in each group) may have rendered the differences trivial; that is, less than a unit difference separated all the scores.

The identification of IQ differences among the three categories of handicapped children should be expected; in fact, intelligence scores are the primary basis for differential definitions applied to EMR and LD or ED children. The extent to which definitional differences result in differential attitudes and behaviors within classrooms still remains undefined after the studies of Becker and Gajar have been completed.

In studying teacher behaviors, Bryan and Wheeler (1976) reported that teachers of normal children talked to groups of children more often than "special" teachers did; they presented some evidence for commonality of teacher interactions in special classes. In another study, Dembo, Yoshida, Reilly, and Reilly (1978) observed similar "patterns of teacher-student interaction" in the classrooms of "educable mentally retarded and educationally handicapped children"; teachers of mildly handicapped children seemed to behave similarly toward their students. Sherry and Algozzine (1979) observed that the classroom behaviors of EMR and ED children were similar when the students were in resource or regular classrooms. Sherry (1979) found that the behavior of emotionally handicapped, LD, and EMR children was similar in resource rooms but different in regular classrooms. While several studies have shown that differences exist between "exceptional" children and "normal" children (Bryan & Bryan, 1975; Harrison, Budoff,

& Greenberg, 1975), few studies have investigated classroom behavior and/or teaching variables that might differentiate the categorical groups.

The purpose of this research was to ascertain the extent to which teachers of exceptional children responded differently to a questionnaire designed to collect information about their educational programs. It was hypothesized that there would be no differences in the responses of LD, EMR, and ED resource room teachers with regard to various educational aspects of their classrooms. While it was recognized that written responses of teachers might be limited in terms of their applicability to actual practice, the nature of the research was judged preliminary and this limitation was accepted.

Method

Data were collected on two different occasions from two groups of special education teachers. The second group constituted a replication sample of the first.

Subjects

Ninety-five special education teachers from the Alachua County School System volunteered to participate in the questionnaire study; the responses of 25 LD, EMR, and ED teachers were randomly selected for further study. Each of the selected teachers was certified in the area he/she was currently teaching, 85% of the subjects were female, 45% were married, and 17% were black. Chi square analysis suggested that the distributions of teacher sex, marital status, and race were distributed similarly among the categorical classrooms. The average age of the participants was 29.7

years and the average number of years teaching experience was 5.7; no differences were indicated in these variables among LD, EMR, and ED teachers. This group constituted the replication sample.

Seventy-five (i.e., 25 ED, LD, and EMR) special education teachers from Alachua County had already participated in a questionnaire survey regarding their classes and teaching practices. The demographic characteristics of this first group were quite similar to those of the replication sample: 78% were female, 53% were married, and 13% were black. The average age of the subjects was 28.2 years, and the average number of years teaching experience was 5.2. No differences were indicated in any of these variables when comparisons were made according to types of children taught.

Procedure

A questionnaire was developed to obtain information about the educational program of each teacher; it included several general content areas. The first section contained a series of statements of objectives that could be applied to resource room programming for exceptional children. Three of the statements appeared in the same form on the questionnaires distributed to each group of teachers; these included the following:

> In resource room programming for [the type children being taught by the responding teacher] it is (very/not very) important...
>
> 1. To enable the child to learn in the basic education program.
> 2. To reduce inappropriate types of behavior in normal circumstances.
> 3. To provide appropriate educational interventions as determined by the student's present needs in the affective domain.

The teachers were asked to indicate how important (1 = not very important to 5 = very important) each objective was to their current programming efforts.

The next questionnaire section requested information about the student population, the total number of children served at each grade level, the amounts of time spent in attendance by those children during the day, and the length of time since placement; responses were obtained through short-answer questions. The teachers also were asked to indicate whether they saw a relationship between the number of years of placement and the amount of time a child was currently spending in their program. In addition, information was collected on the number of children to be dismissed or involved in more intensive programming.

The final section included questions about the actual resource room program. Each teacher was asked to select the best descriptor of his/her orientation toward working with a specific group of exceptional children. The teachers also provided estimates of the percentage of time they spent (or should spend) in academic or other curriculum areas, and they indicated the most frequently utilized teaching activities from a list of twenty techniques.

A series of research questions was formulated to determine the extent to which resource teachers of exceptional children responded similarly regarding their teaching perspectives. The following areas of interest were investigated.

1. Relative importance of the three general objectives.
2. Number of children served.
3. Length of time of service.
4. Relationship between time of service and type of handicap.
5. Importance of specific teaching activities.
6. Allocation of teaching time to selected teaching areas.

7. Teacher's general prognosis for his/her children.

Responses of the two samples of teachers to the questionnaire were analyzed separately. The level of significance for all tests was set at 0.01. All comparisons were made among the three types of teachers; that is, responses of LD, EMR, and ED teachers were compared on responses made on two different occasions.

Results

In general, analyses of the results obtained from administration of the questionnaire to separate samples indicated consistent responding patterns. The presentation of results has been organized with regard to the seven questions of interest; similarities between results for each sample should be assumed unless otherwise indicated.

General Objectives

In the initial sample, teachers of EMR children felt it was less important ($\bar{X}$ = 4.3) to "enable a child to learn in the basic education program" than did teachers of emotionally disturbed children ($\bar{X}$ = 4.9); LD teachers' ratings were not different from those of ED or EMR teachers. No differences were indicated among the teacher groups in the importance of reducing inappropriate behavior or providing interventions based on a child's affective needs.

The ratings from the replication sample were different only with regard to the importance of enabling children to learn in the basic education program. Teachers of emotionally disturbed children rated this objective as less important ($\bar{X}$ = 3.4) than LD ($\bar{X}$ = 4.6) or EMR ($\bar{X}$ = 4.3) teachers who rated it similarly. Again, no differences were indicated in relative importance of dealing with inappropriate behavior or

affective needs.

Number of Children Served

Teachers of LD, EMR, and ED children reported serving approximately the same numbers of children. Enrollments in LD tended to be higher, but all obtained differences were not statistically significant.

Length of Services

In the initial sample more ED and LD children received services for 30 to 60 minutes, while EMR children received instruction for 120 minutes more often. In the replication sample, fewer ED children and more LD children received 30 to 60 minutes of instruction and more ED children received 120 minutes of time in the resource rooms. LD children seemed to consistently receive less instruction.

Time in Program vs. Time in Class

Approximately 70% of the teachers in both samples felt there was no relationship between the number of years of placement in the program and the amount of time the child was currently being seen; this pattern was similar for LD, EMR, and ED teachers (χ^2 = 0.13, 3.71, $p > .01$). For those teachers who felt there was a relationship between years of placement and current time if recently placed, LD, EMR, and ED teachers also responded similarly (χ^2 = 0.0, 1.75, $p > .01$).

Specific Teaching Activities

Teachers were asked to indicate the five most frequently used teaching activities practiced in their classrooms; the following differences were found:

1. Teachers of EMR children taught manners more than teachers of LD children; no differences were indicated between ED teachers' responses and those of other teachers.

2. Teachers of EMR children indicated less conferencing with regular classroom teachers than did teachers of LD and ED children.
3. Teachers of EMR children indicated using more pre-vocational training in their programs than did other teachers.
4. Teachers of LD children used remediation of process deficits more than ED teachers; no differences were indicated between EMR teachers' responses and those of other teachers.
5. Teachers of LD children indicated less use of everyday learning skills activities than teachers of ED children; no differences were indicated between responses of EMR teachers and others.

While selected differences were indicated for certain "teaching activities," the use of most activities was reported to be similar for the three groups of teachers. For example, no differences were indicated in reported use of values clarification, remedial reading, science projects, life space interviews, handwriting information, role playing, language/communication training, individual academic tutoring, and other related activities (i.e., arts and crafts, physical education).

Allocation of Time

Teachers were asked to indicate the percentage of time they spend and should spend in academic and social training. No differences were indicated in the amount of time spent in either of these areas; the initial sample reported spending approximately 55% of their time with "academics" and 18% with "social" activities. The replication sample reported spending 61% of their time with "academics" and 18% with "social" activities.

In general, teachers felt less than 20% of their time should be spent with "social" activities and about 50% with "academics." One exception was in the initial sample in which ED teachers indicated they should spend 37% of their time with academics while LD (56%) and EMR (55%) reported similar percentages.

General Prognosis

Teachers were asked to indicate the number of students they felt would be dismissed at the end of the school year, the number who would need more intensive programming, and the average remaining time in program (i.e., months of service) for children likely to return the following year. No differences were indicated among the three groups of teachers' responses to these questions regarding prognosis.

Discussion

Teachers in this investigation were asked to provide information regarding the children in their classes and some of the program activities used in teaching them; equal numbers of teachers of LD, EMR, and ED children were sampled on two occasions. In general, teachers' responses to the questionnaire items were similar. For example, they responded alike when asked about the importance of affective needs of children, and the need to reduce inappropriate behaviors. Approximately the same numbers of children were reported in all levels of LD, EMR, and ED programs, and the length of time in the program was similarly related to the current time of service for all groups. Teachers also indicated spending about the same amount of time with particular types of material (i.e., academic vs. social) and teaching activities (i.e., remedial instruction, life-space interviews, etc.). No differences were indicated in the prognostic

statements made by teachers of LD, EMR, or ED teachers.

Those areas in which differences occurred tended to be more related to service delivery than general practice. For example, some teachers indicated that EMR and ED children spent more time in their classes; LD children tended to be seen for 30 to 60 minutes more often than were the other children. Teachers of EMR children indicated using some different teaching activities more often than other teachers (e.g., teaching manners, less regular class conferencing, pre-vocational training) while LD teachers were more involved in remediation of process deficits and less involved in teaching everyday learning skills than ED teachers.

While the results of this investigation are limited in that only teachers' written responses were sampled, they support the validity of the allegation by Hallahan and Kauffman (1976) that teaching practices for exceptional children overlap. Before definitive statements are made, however, more detailed analyses of actual teaching practices clearly are warranted. Should it be found that similarities outweigh differences among teachers of mildly handicapped youngsters, implications for teacher training institutions and programs will be evident.

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Footnote

Bob Algozzine is affiliated with the Institute for Research on Learning Disabilities at the University of Minnesota.

PUBLICATIONS

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